

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

National Franchise Association PAC (NFA-PAC)

ADDRESS (number and street)

1201 Roberts Boulevard, Suite 100

☐Check if different
than previously
reported. (ACC)

Kennesaw

GA

30144

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00329425

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

William Harloe

Signature of Treasurer

Electronically Filed by William Harloe

Date

07

13

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Franchisee Association PAC (NFA-PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		26973.48
(b) Cash on Hand at Beginning of Reporting Period	26973.48	
(c) Total Receipts (from Line 19)	99411.19	99411.19
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	126384.67	126384.67
7. Total Disbursements (from Line 31)	18575.64	18575.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	107809.03	107809.03
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

National Franchisee Association PAC (NFA-PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	97025.00	97025.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	1025.00	1025.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	98050.00	98050.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	98050.00	98050.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	361.19	361.19
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	99411.19	99411.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	99411.19	99411.19

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	2575.64	2575.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	2575.64	2575.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	16000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18575.64	18575.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	18575.64	18575.64

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	98050.00	98050.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98050.00	98050.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2575.64	2575.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2575.64	2575.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Joseph Anghelone

Mailing Address 118 Meirs Rd.

City State Zip Code
 Cream Ridge NJ 08514

FEC ID number of contributing
federal political committee.

C

Name of Employer
GeorgeTowe Group LP

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 0 6 / 2 0 0 7

Transaction ID: 70712.C628

Amount of Each Receipt this Period

625.00

Receipt

Full Name (Last, First, Middle Initial)

B. Joseph Anghelone

Mailing Address 118 Meirs Rd.

City State Zip Code
 Cream Ridge NJ 08514

FEC ID number of contributing
federal political committee.

C

Name of Employer
GeorgeTowe Group LP

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 70712.C757

Amount of Each Receipt this Period

625.00

Receipt

Full Name (Last, First, Middle Initial)

C. Thomas Barnett

Mailing Address 5301 N 21st St

City State Zip Code
 Phoenix AZ 85016-3465

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barnett Mgmt. Company

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 8 / 2 0 0 7

Transaction ID: 70712.C692

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) John Barto, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 439 Woodland Rd.		Transaction ID: 70712.C759
City Walnutport	State PA	Zip Code 18088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Jade Mgmt., Inc.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

B. Full Name (Last, First, Middle Initial) Perry Beaton		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 1 / 2 0 0 7
Mailing Address 3130 Willowridge Rd. #C		Transaction ID: 70712.C712
City Marion	State IA	Zip Code 52302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Beaton, Inc.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Receipt

C. Full Name (Last, First, Middle Initial) Frank Bennett		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address 10645 72nd Rd SE		Transaction ID: 70712.C771
City Agency	State MO	Zip Code 64401-9126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Sonlan Rest. Corp.	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Hugh Bigham Mailing Address 1100 Queens Rd City State Zip Code Charlotte NC 28207-1850 FEC ID number of contributing federal political committee. C Name of Employer Golden B Enterprises, Ltd. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">500.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7 </div> Transaction ID: 70712.C636 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> Receipt
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B. Full Name (Last, First, Middle Initial) Mary Bigham Mailing Address 1100 Queens Rd. City State Zip Code Charlotte NC 28207 FEC ID number of contributing federal political committee. C Name of Employer Golden B Enterprises, Ltd. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">500.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7 </div> Transaction ID: 70712.C635 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> Receipt
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C. Full Name (Last, First, Middle Initial) William J. Bishop Mailing Address 441 E Strawberry Dr City State Zip Code Mill Valley CA 94941-3262 FEC ID number of contributing federal political committee. C Name of Employer National Franchisee Association Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="text-align: right;">500.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7 </div> Transaction ID: 70712.C693 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> Receipt
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SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Nathan Blau		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 63 Kenwood Drive		Transaction ID: 70712.C689
City State Zip Code Trenton NJ 07677	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Dominate Food Services, Inc.	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Howard Bowen		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7
Mailing Address 9651 Old National Pike		Transaction ID: 70712.C654
City State Zip Code Hagerstown MD 21740	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Western Maryland Fast Food	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Randall Bradley		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 505 N. Vine Street		Transaction ID: 70712.C706
City State Zip Code Agency IA 52530	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Kadina Corp.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Richard Brening Mailing Address 7900 Shelborne Drive City State Zip Code Granite Bay CA 95746 FEC ID number of contributing federal political committee. C Name of Employer Brening Enterprises Occupation Franchise Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 21 / 2007 Transaction ID: 70712.C661 Amount of Each Receipt this Period 500.00 Receipt
B. Full Name (Last, First, Middle Initial) Ron Broatch Mailing Address 6044 N. 44th Place City State Zip Code Paradise Valley AZ 85253 FEC ID number of contributing federal political committee. C Name of Employer Broatch Management Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 2500.00		Date of Receipt MM / DD / YYYY 05 / 25 / 2007 Transaction ID: 70712.C763 Amount of Each Receipt this Period 2500.00 Receipt
C. Full Name (Last, First, Middle Initial) Mark Bystry Mailing Address 1007 Valley Acres Road City State Zip Code Houston TX 77062 FEC ID number of contributing federal political committee. C Name of Employer Jam-Mary, Inc Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 625.00		Date of Receipt MM / DD / YYYY 05 / 14 / 2007 Transaction ID: 70712.C758 Amount of Each Receipt this Period 625.00 Receipt

SUBTOTAL of Receipts This Page (optional)

3625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 64

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

Walter Chuda

Mailing Address 14750 Truitt Farm Dr.

City State Zip Code
 Centreville VA 20120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burgers of Columbia Pike,
Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: 70712.C640

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Al Cipelletti

Mailing Address 269 Barnstable Drive

City State Zip Code
 Daniels WV 25832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aimar Food Corp.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 7 / 2 0 0 7

Transaction ID: 70712.C633

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Diane L. Clayton

Mailing Address 210 Saddle Ridge
Suite 312

City State Zip Code
 Kingsport TN 37664

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanmar, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 3 0 / 2 0 0 7

Transaction ID: 70712.C718

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 64

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Diane L. Clayton		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 210 Saddle Ridge Suite 312		Transaction ID: 70712.C747	
City Kingsport	State TN	Zip Code 37664	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Vanmar, Inc.	Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) Mike Clayton		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 7	
Mailing Address 105 Ford Ave		Transaction ID: 70712.C626	
City Kingsport	State TN	Zip Code 37663-2375	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Aaron Enterprises, Inc.	Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
C. Full Name (Last, First, Middle Initial) Joe Clements, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7	
Mailing Address PO Box 14477		Transaction ID: 70712.C644	
City Baton Rouge	State LA	Zip Code 70898-4477	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Clements Management, LLC	Occupation Franchise Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) R. Denny Cole, Jr. Mailing Address PO Box 359 City State Zip Code Hodges SC 29653-0359 FEC ID number of contributing federal political committee. C Name of Employer Southwind Restaurants, LLC Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 Transaction ID: 70712.C649 Amount of Each Receipt this Period 500.00 Receipt
B. Full Name (Last, First, Middle Initial) Marc Colluro Mailing Address 5782 Porch Swing Place City State Zip Code Hoschton GA 30548 FEC ID number of contributing federal political committee. C Name of Employer VMKM Management LLC Occupation Franchise Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 Transaction ID: 70712.C648 Amount of Each Receipt this Period 1000.00 Receipt
C. Full Name (Last, First, Middle Initial) Raymond A. Conn Mailing Address 11160 Kenwood Rd. City State Zip Code Cincinnati OH 45242 FEC ID number of contributing federal political committee. C Name of Employer Restaurant Assoc Cincinnati Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 3 / 2 0 0 7 Transaction ID: 70712.C722 Amount of Each Receipt this Period 500.00 Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Peter J. Cotter		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7
Mailing Address 5009 Harbour Towne Dr.		Transaction ID: 70712.C656
City State Zip Code Raleigh NC 27604	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer KIN Restaurants LLC	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) F. Rick Cowley		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 2245 E. Oakland Street		Transaction ID: 70712.C707
City State Zip Code Chandler AZ 85225-4047	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer TBM Inc.	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) David Cutter		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 2687 Wind Feather Trl		Transaction ID: 70712.C666
City State Zip Code Reno NV 89511-5338	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer RID Management, Inc.	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Elliott Davenport		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 5909 Lola Lake Rd.		Transaction ID: 70712.C736
City Lookout Mountain	State GA	Zip Code 30750
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hometown Folks, LLC	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

B. Full Name (Last, First, Middle Initial) Gordon L. Davenport		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 606 Fleetwood Dr.		Transaction ID: 70712.C716
City Lookout Mountain	State TN	Zip Code 37350
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hometown Folks, LLC	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

C. Full Name (Last, First, Middle Initial) Bill Degen		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1733 S. Ingalls St.		Transaction ID: 70712.C731
City Grand Island	State NE	Zip Code 68803
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Degen Properties, Inc.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Michael DeRosa		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 211 McKinley Ave		Transaction ID: 70712.C704 Amount of Each Receipt this Period 500.00 Receipt
City Eau Claire	State WI	
Zip Code 54701-4813		
FEC ID number of contributing federal political committee. C		
Name of Employer Coaches Fast Food Inc.	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Michael C. DiSeveria		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 116200 Bellingham Drive		Transaction ID: 70712.C665 Amount of Each Receipt this Period 5000.00 Receipt
City Germantown	State MD	
Zip Code 20874		
FEC ID number of contributing federal political committee. C		
Name of Employer Potomac Foods Company	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Gregory Dolphin		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 3145 Dean Court No. 1100		Transaction ID: 70712.C697 Amount of Each Receipt this Period 1250.00 Receipt
City Minneapolis	State MN	
Zip Code 55416		
FEC ID number of contributing federal political committee. C		
Name of Employer Dolphin Fast Food, Inc.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)

6750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Gregory Dolphin		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 3145 Dean Court No. 1100		Transaction ID: 70712.C769
City Minneapolis	State MN	Zip Code 55416
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Dolphin Fast Food, Inc.	Occupation Franchise Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B. Full Name (Last, First, Middle Initial) Nicole Dreier		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7
Mailing Address 4155 N. 49th Way		Transaction ID: 70712.C686
City Phoenix	State AZ	Zip Code 85018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer END, Inc.	Occupation Franchisee	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C. Full Name (Last, First, Middle Initial) Gary Edwards		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 2 / 2 0 0 7
Mailing Address PO Box 1409		Transaction ID: 70712.C768
City Westminster	State MD	Zip Code 21158-5409
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Chesapeake Burger, LLC	Occupation Franchisee	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Keith Egyed Mailing Address 1250 Tower Ln City Erie State PA Zip Code 16505-2533 FEC ID number of contributing federal political committee. C Name of Employer PEC Management Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7 Transaction ID: 70712.C719 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) Willard Eldred Mailing Address 6033 S. Zeno Ct. City Aurora State CO Zip Code 80016 FEC ID number of contributing federal political committee. C Name of Employer Bilikin, Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 Transaction ID: 70712.C752 Amount of Each Receipt this Period 250.00 Receipt
C. Full Name (Last, First, Middle Initial) Dennis E. Erickson Mailing Address 7401 S. 95th Court City Lincoln State NE Zip Code 68526 FEC ID number of contributing federal political committee. C Name of Employer Horizon Holding Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7 Transaction ID: 70712.C695 Amount of Each Receipt this Period 1000.00 Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Daniel Fitzpatrick
Mailing Address 4220 Edison Lakes Pkwy

City State Zip Code
Mishawaka IN 46545-1440

FEC ID number of contributing federal political committee.

C

Name of Employer
Quality Dining, Inc.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 7

Transaction ID: 70712.C672

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jerry Fitzpatrick
Mailing Address 17635 Saint Patricks Ct

City State Zip Code
Granger IN 46530-7833

FEC ID number of contributing federal political committee.

C

Name of Employer
Quality Dining, Inc.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: 70712.C663

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Davis Flis
Mailing Address 5631 Chevaux Ct.

City State Zip Code
Little Rock AR 72223

FEC ID number of contributing federal political committee.

C

Name of Employer
Flis Enterprises, Inc.Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70712.C680

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Jacqueline Ford Mailing Address 12519 Cliff Creek Drive City State Zip Code Huntersville NC 28078 FEC ID number of contributing federal political committee. C Name of Employer Great Food Services Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7 Transaction ID: 70712.C634 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) David Forney Mailing Address 6270 N. 78th St. Unit 329 City State Zip Code Scottsdale AZ 85250 FEC ID number of contributing federal political committee. C Name of Employer JDF Enterprises, Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Transaction ID: 70712.C749 Amount of Each Receipt this Period 500.00 Receipt
C. Full Name (Last, First, Middle Initial) James Froio Mailing Address 142 Shaw Farm Road City State Zip Code Canyon MA 02021 FEC ID number of contributing federal political committee. C Name of Employer Froio Management Group, Inc. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: 70712.C727 Amount of Each Receipt this Period 2500.00 Receipt

SUBTOTAL of Receipts This Page (optional)**3250.00****TOTAL** This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Clifford Galen		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address 396 Country Club Drive		Transaction ID: 70712.C682
City Battle Creek	State MI	Zip Code 49015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Novo Operations Inc.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Receipt

B. Full Name (Last, First, Middle Initial) Clifford Galen		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 396 Country Club Drive		Transaction ID: 70712.C770
City Battle Creek	State MI	Zip Code 49015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Novo Operations Inc.	Occupation Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

C. Full Name (Last, First, Middle Initial) Stephen Gans		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address 109 Brook Run		Transaction ID: 70712.C683
City Hockessin	State DE	Zip Code 19707-2405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Interstate Equities	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Jack George

Mailing Address P.O. Box 21539

City State Zip Code
 Beaumont TX 77720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Go-Burgers, LP

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 6 / 2 0 0 7

Transaction ID: 70712.C674

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

B. Carl Grimm

Mailing Address 4395 Ivywood Drive

City State Zip Code
 Rock Hill SC 29732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carl-Cin Restaurants, Inc.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: 70712.C701

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

C. James Gullo

Mailing Address 977 Escalante Drive

City State Zip Code
 Saint George UT 84790

FEC ID number of contributing
federal political committee.

C

Name of Employer
C & G Management

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 1 / 2 0 0 7

Transaction ID: 70712.C713

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. James M. Haas

Mailing Address 5219 96th St E

City

Bradenton

State

FL

Zip Code

34211-3774

FEC ID number of contributing
federal political committee.

C

Name of Employer
KLJK Enterprises, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 70712.C737

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

B. Kevin J. Haas

Mailing Address 12453 Ostara Ct

City

Fishers

State

IN

Zip Code

46037-8755

FEC ID number of contributing
federal political committee.

C

Name of Employer
K & JK Enterprises, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 7

Transaction ID: 70712.C725

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

C. James Hantala

Mailing Address 7015 Hearn Pond Rd

City

Seaford

State

DE

Zip Code

19973-5727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ha Tala, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70712.C681

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. William A. Harloe, Jr.

Mailing Address 304 Vale Road

City State Zip Code
 Belair MD 21014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harloe Management Corp.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 70712.C751

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

B. David Harper

Mailing Address 1638 Degiorgio St

City State Zip Code
 Ogden UT 84401-9802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Meridian Restaurants

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 0 5 / 2 0 0 7

Transaction ID: 70712.C690

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

C. James D. Harrison

Mailing Address 5590 Piermont Ct.

City State Zip Code
 Westerville OH 43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harrison Restaurants, Inc.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 2 / 2 0 0 7

Transaction ID: 70712.C694

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

James Hatley

Mailing Address 77 Dow Pl
#1302

City State Zip Code
San Francisco CA 94107-4189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burger King

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 7 / 2 0 0 7

Transaction ID: 70712.C729

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Mark Haynes

Mailing Address 22820 SW Hampton Ct

City State Zip Code
Blue Springs MO 64015-9624

FEC ID number of contributing
federal political committee.

C

Name of Employer
MSH Restaurant Mgmt Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 7

Transaction ID: 70712.C745

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Martin Hittinger

Mailing Address 80 Palisade Avenue

City State Zip Code
Cliffside Park NJ 07010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Almar Food Corp.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70712.C677

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

Brad Hoag

Mailing Address 11401 Foxtrot

City State Zip Code

Sparks Glencoe

MD

21152

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix Foods

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 7

Transaction ID: 70712.C714

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Mark Holm

Mailing Address 4332 Summer Breeze Ter

City State Zip Code

Vero Beach

FL

32967-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fast Food Enterprises 2,
LLP

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 9 / 2 0 0 7

Transaction ID: 70712.C637

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

Benjamin F. Jarratt

Mailing Address P.O. Box 650728

City State Zip Code

Sterling

VA

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northern Virginia Group,
Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 7

Transaction ID: 70712.C651

Amount of Each Receipt this Period

1250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Benjamin F. Jarratt
Mailing Address P.O. Box 650728

City State Zip Code
Sterling VA 20165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northern Virginia Group,
Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 0 7

Transaction ID: 70712.C756

Amount of Each Receipt this Period

1250.00

Receipt

B. Full Name (Last, First, Middle Initial)
David Jenkins
Mailing Address 2820 15th Avenue, Sw

City State Zip Code
Rochester MN 55902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rotab Corporation

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: 70712.C703

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Larry Jones
Mailing Address 3731 Bridgeport Drive

City State Zip Code
Ames IA 50010

FEC ID number of contributing
federal political committee.

C

Name of Employer
JFP Corporation

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: 70712.C744

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Bill Keller			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 105 Riveria Drive			Transaction ID: 70712.C743	
City State Zip Code Georgetown KY 40324			Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer BMT of Kentucky, Inc.		Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		
B. Full Name (Last, First, Middle Initial) Larry Kent			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7	
Mailing Address 840 Deltona Blvd.			Transaction ID: 70712.C655	
City State Zip Code Deltona FL 32725			Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer IWA Restaurant Group, Inc.		Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
C. Full Name (Last, First, Middle Initial) Mitchell C. Laird			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 7	
Mailing Address 12813 N 8th Ave			Transaction ID: 70712.C676	
City State Zip Code Phoenix AZ 85029-1806			Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer MCL Enterprises, Inc.		Occupation Franchisee		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

Lawrence W. Laxton, Jr.

Mailing Address 8 Steam Gun Place

City State Zip Code
Hilton Head Island SC 29928

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawrence Laxton Restaura-
ts, I

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 7

Transaction ID: 70712.C630

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Arthur J. Lee

Mailing Address 9234 Southern Breeze Dr.

City State Zip Code
Orlando FL 32836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lee Wesley Restaurants,
LLC

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 2 / 2 0 0 7

Transaction ID: 70712.C696

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Glenn Levins

Mailing Address 5967 Vintage Oaks Circle

City State Zip Code
Delray Beach FL 33484

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix Organization

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: 70712.C748

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

Steven Lewis

Mailing Address PO Box 528
818 Evans Road

City State Zip Code
Gwynedd Vly PA 19437-0528

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Restaurants

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 0 7

Transaction ID: 70712.C691

Amount of Each Receipt this Period

1000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Jill Lillaney

Mailing Address 1 Blackfield Dr.
#468

City State Zip Code
Belvedere Tiburon CA 94920

FEC ID number of contributing
federal political committee.

C

Name of Employer
MRB Holdings Corp.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 1 / 2 0 0 7

Transaction ID: 70712.C660

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Em Luther

Mailing Address 1229 E College Dr

City State Zip Code
Marshall MN 56258-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer
LuWal Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 5 / 2 0 0 7

Transaction ID: 70712.C724

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Rodney & Patti Martin
Mailing Address 174 Dix Creek Rd.

City State Zip Code
Hubert NC 28539

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Coast Foods, Inc.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 7

Transaction ID: 70712.C646

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas McDonald
Mailing Address 3 Sable Ridge Ct.

City State Zip Code
Las Vegas NV 89135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glencoe Management, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: 70712.C728

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ray Meeks
Mailing Address 321 Forest Dr.

City State Zip Code
Henderson NC 27536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alabama Quality, LLC

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 0 7

Transaction ID: 70712.C687

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Ashok Meht

Mailing Address 42739 Cedar Ridge Blvd

City

Chantilly

State

VA

Zip Code

20152-6370

FEC ID number of contributing
federal political committee.

C

Name of Employer
AM-PM Enterprises, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: 70712.C702

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Stephen Miller

Mailing Address 3 E Water St.

City

Chillicothe

State

OH

Zip Code

45601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller Management

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 2 / 2 0 0 7

Transaction ID: 70712.C767

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Joseph Mirabile

Mailing Address 2830 Forest Hill Irene

City

Germantown

State

TN

Zip Code

38139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mirabile Investment Corpor-
ation

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: 70712.C669

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

Guillermo Montero

Mailing Address 2421 N. Cooper

City State Zip Code
 Arlington TX 76006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montero Family Restaurant-
s, Inc.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 2 / 2 0 0 7

Transaction ID: 70712.C664

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Jerry Moore

Mailing Address 1939 Noblin Woods Trl.

City State Zip Code
 Duluth GA 30097

FEC ID number of contributing
federal political committee.

C

Name of Employer
Centurion Food, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: 70712.C642

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

Ramon Moral

Mailing Address 9401 W. Calusa Club Drive

City State Zip Code
 Miami FL 33186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ramako Corp.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 0 6 / 2 0 0 7

Transaction ID: 70712.C629

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

John Newcomb

Mailing Address 905 Elliott Dr.

City State Zip Code
 Blacksburg VA 24060

FEC ID number of contributing
federal political committee.

C

Name of Employer
John Newcomb Ent.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 1 / 2 0 0 7

Transaction ID: 70712.C764

Amount of Each Receipt this Period

1000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Ed Northrop

Mailing Address 2203 Trowbridge Road

City State Zip Code
 Albany GA 31707

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDN, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 2 / 2 0 0 7

Transaction ID: 70712.C643

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Don OBrien

Mailing Address 1440 Wellington Oaks

City State Zip Code
 Beaumont TX 77706

FEC ID number of contributing
federal political committee.

C

Name of Employer
Go-Burgers, L.P.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 0 2 / 2 0 0 7

Transaction ID: 70712.C688

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)

Eric Oppenheim

Mailing Address 1017 Curtis Pl.

City State Zip Code
 Gastonia NC 28052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Republic Foods

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 1 / 2 0 0 7

Transaction ID: 70712.C755

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

David Parks

Mailing Address 161 St. Andrews

City State Zip Code
 Saint Simons Islan GA 31522

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parks Restaurant Mgmt, Inc

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 6 / 2 0 0 7

Transaction ID: 70712.C761

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Bill Patterson

Mailing Address 1250 Tower Ln.

City State Zip Code
 Erie PA 16505

FEC ID number of contributing
federal political committee.

C

Name of Employer
PEC Management

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 1 / 2 0 0 7

Transaction ID: 70712.C658

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Bruce Pavlikowski
Mailing Address 3710 E Finch Ln

City State Zip Code
Flagstaff AZ 86004-7705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sheehy Ent. Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 7

Transaction ID: 70712.C684

Amount of Each Receipt this Period

1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mike Peters
Mailing Address 3800 Saxton Ct.

City State Zip Code
Greenville NC 27834

FEC ID number of contributing
federal political committee.

C

Name of Employer
King Franchises, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 70712.C741

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Larry Ralston
Mailing Address 40440 Aster Place

City State Zip Code
Palmdale CA 93551

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anthonpe Valley Restoran-
ts

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: 70712.C671

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Bob Reardon Mailing Address 3003 Wolf Trap Dr. City State Zip Code Wilson NC 27893 FEC ID number of contributing federal political committee. C Name of Employer Spinlar Enterprises Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7 Transaction ID: 70712.C639 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) Jim Reddin Mailing Address 5421 Fehl Rd. City State Zip Code Hopkins MN 55343 FEC ID number of contributing federal political committee. C Name of Employer RedKing Food LLC Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7 Transaction ID: 70712.C700 Amount of Each Receipt this Period 500.00 Receipt
C. Full Name (Last, First, Middle Initial) Bob Reid Mailing Address 1000 Potters Bluff City State Zip Code Monroe NC 28110 FEC ID number of contributing federal political committee. C Name of Employer Freedom Rest. LLC Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7 Transaction ID: 70712.C652 Amount of Each Receipt this Period 250.00 Receipt

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Samuel Risola
Mailing Address 57 Central Court

City State Zip Code
Tarpon Springs FL 34689-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Samar Mgt. Corp.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 7

Transaction ID: 70712.C675

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gary W. Robison
Mailing Address 6827 Raspberry Run

City State Zip Code
Littleton CO 80125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rob-Kraft, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: 70712.C733

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. Kirk Robison
Mailing Address 4445 N. Mesa
Ste. 100

City State Zip Code
El Paso TX 79902-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer
QSR Burger's One, L.P.

Occupation
Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: 70712.C734

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Len Rohde		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 324 Alta Vista Ave.		Transaction ID: 70712.C699
City Los Altos	State CA	Zip Code 94022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rohde & Associates	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Receipt

B. Full Name (Last, First, Middle Initial) Tom Roose		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7
Mailing Address 5588 Airport Rd.		Transaction ID: 70712.C641
City Anderson	State SC	Zip Code 29626
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer West Wind Inc.	Occupation Franchisee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

C. Full Name (Last, First, Middle Initial) Mike Royal		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 7
Mailing Address 129 Via Mari Posa		Transaction ID: 70712.C620
City Belle Glade	State FL	Zip Code 33430
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer National Franchisee Assoc- iatio	Occupation Burger King Franchise Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Joseph Rubin Mailing Address 255 Carquinez Ct. City Benecia State CA Zip Code 94510 FEC ID number of contributing federal political committee. C Name of Employer Centennial Meat Corp. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7 Transaction ID: 70712.C708 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) Frank D. Sabo Mailing Address 2925 Coles Way City Atlanta State GA Zip Code 30350 FEC ID number of contributing federal political committee. C Name of Employer Sabo Ventures Inc. Occupation Franchise Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 7 Transaction ID: 70712.C657 Amount of Each Receipt this Period 500.00 Receipt
C. Full Name (Last, First, Middle Initial) Alex Salueiro Mailing Address 70 Peregrine Xing City Savannah State GA Zip Code 31411-2897 FEC ID number of contributing federal political committee. C Name of Employer Savannah Restaurants Corp. Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 9 / 2 0 0 7 Transaction ID: 70712.C638 Amount of Each Receipt this Period 2500.00 Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Shennen Saltzman

Mailing Address 906 Pebble Beach Dr

City State Zip Code
 North Sioux City SD 57049-5107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saltzman & Saltzman Mgmt.
Co.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 7

Transaction ID: 70712.C738

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

B. William & Patricia Scarbrough

Mailing Address 508 Blackhawk Club Drive

City State Zip Code
 Danville CA 94506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scarbrough Management Cor-
p.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 7

Transaction ID: 70712.C705

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

C. Dwaine Setzer

Mailing Address 3234 Keller Bend Rd

City State Zip Code
 Knoxville TN 37922-6525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Ridge Foods, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 4 / 2 0 0 7

Transaction ID: 70712.C762

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Michael H. Simmonds

Mailing Address 11125 Pierce Plz

City State Zip Code
 Omaha NE 68144-1864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Simmonds Restaurant Mgmt.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 2 / 2 6 / 2 0 0 7

Transaction ID: 70712.C673

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

B. Michael E. Sloan

Mailing Address 1626 Etzler Rd

City State Zip Code
 Troutville VA 24175-6250

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sloan Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 5 / 2 0 0 7

Transaction ID: 70712.C760

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

C. Bernard D. Sokolsky

Mailing Address 4764 Longmont Rd

City State Zip Code
 Virginia Beach VA 23456-5016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lionheart LTD

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 0 7

Transaction ID: 70712.C739

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial)
Burley Sweeney
Mailing Address 2070 Rivershore Rd

City State Zip Code
Elizabeth City NC 27909-6212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crown Food, Ltd.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 70712.C740

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Doug Thompson
Mailing Address 20 Freedom Rd NE

City State Zip Code
Alexandria MN 56308-8903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lakeland Mgmt. Co.

Occupation
Griffin-Schoen Enterprises

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: 70712.C715

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Gary Tiedman
Mailing Address 295 E Lincoln Rd

City State Zip Code
Kokomo IN 46902-3562

FEC ID number of contributing
federal political committee.

C

Name of Employer
G & B Mgt. Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 0 7

Transaction ID: 70712.C754

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Brian Vaughn		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 809 Madison Ave N		Transaction ID: 70712.C650
City Douglas	State GA	Zip Code 31533-3111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Nearly Famous, Inc.	Occupation Franchise Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Tony Versaci		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 562 Linden		Transaction ID: 70712.C667
City Birmingham	State MI	Zip Code 48009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Michigan Multi-King, Inc.	Occupation Franchise Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Thomas Walsh, Sr.		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 15 Riverview Hts.		Transaction ID: 70712.C717
City Sioux Falls	State SD	Zip Code 57105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Dakota King, Inc.	Occupation Franchise Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Jim Walther

Mailing Address 34 Broadview Ave.

City

Warrenton

State

VA

Zip Code

20186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waltco Foods, Inc.

Occupation

Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: 70712.C730

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Ed & Beth Westfall

Mailing Address 389 Auburn Trivette Road

City

Sugar Grove

State

NC

Zip Code

28679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ridge Runner Fast Foods,
Inc.

Occupation

Burger King Franchise Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 7

Transaction ID: 70712.C645

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Donald K. White

Mailing Address 4144 Plateau Rd.

City

Reno

State

NV

Zip Code

89519

FEC ID number of contributing
federal political committee.

C

Name of Employer
First Reno, LLC

Occupation

Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 7

Transaction ID: 70712.C668

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 64

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Michael White Mailing Address 337 Deauville Rd. City Statesville State NC Zip Code 28687 FEC ID number of contributing federal political committee. C Name of Employer MIKAW Corp Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 0 / 2 0 0 7 Transaction ID: 70712.C618 Amount of Each Receipt this Period 500.00 Receipt
B. Full Name (Last, First, Middle Initial) Mike Whitehurst Mailing Address 953 Wynn Circle City Livermore State CA Zip Code 94550 FEC ID number of contributing federal political committee. C Name of Employer Whitehurst Management Company Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Transaction ID: 70712.C670 Amount of Each Receipt this Period 500.00 Receipt
C. Full Name (Last, First, Middle Initial) Leroy Wilkinson Mailing Address 995 Old White Badge Rd. City Waynesboro State VA Zip Code 22980 FEC ID number of contributing federal political committee. C Name of Employer Mtn. Valley Corp Occupation Franchise Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 7 Transaction ID: 70712.C627 Amount of Each Receipt this Period 100.00 Receipt

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 64

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A. Full Name (Last, First, Middle Initial) Leroy Wilkinson Mailing Address 995 Old White Badge Rd. City State Zip Code Waynesboro VA 22980 FEC ID number of contributing federal political committee. C Name of Employer Mtn. Valley Corp. Occupation Franchise Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7 Transaction ID: 70712.C710 Amount of Each Receipt this Period 250.00 Receipt
B. Full Name (Last, First, Middle Initial) Todd Williams Mailing Address 25834 Livingston Cir City State Zip Code Farmington Hills MI 48335-1254 FEC ID number of contributing federal political committee. C Name of Employer Williams Restaurant Occupation Franchisee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 1 / 2 0 0 7 Transaction ID: 70712.C711 Amount of Each Receipt this Period 500.00 Receipt
C. Full Name (Last, First, Middle Initial) Sally Wilson Mailing Address 1052 Lakemont Drive, Nw City State Zip Code Gainesville GA 30501 FEC ID number of contributing federal political committee. C Name of Employer National Franchisee Association Occupation Burger King Franchise Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 Transaction ID: 70712.C647 Amount of Each Receipt this Period 1000.00 Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 64

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Kim Zeller

Mailing Address 23727 Rockrose Dr

City

Golden

State

CO

Zip Code

80401-9185

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bilikin, Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 1 / 2 0 0 7

Transaction ID: 70712.C753

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lynn B. Zody

Mailing Address PO Box 2507

City

Aiken

State

SC

Zip Code

29802-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stix & Co. Inc.

Occupation
Franchisee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 0 7

Transaction ID: 70712.C746

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

97025.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 64

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

A.

Full Name (Last, First, Middle Initial)

Steele for Maryland, Inc.

Mailing Address 1350 Doresey Road
Building A, Suite ACity State Zip Code
Hanover MD 21076-FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 7

Transaction ID: 70712.C721

Amount of Each Receipt this Period

1000.00

Refund of Contribution Made

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 64

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.61

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 7

Transaction ID: 70712.C619

Amount of Each Receipt this Period

13.61

Interest Received

Full Name (Last, First, Middle Initial)

B. Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 7

Transaction ID: 70712.C685

Amount of Each Receipt this Period

25.27

Interest Received

Full Name (Last, First, Middle Initial)

C. Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 7

Transaction ID: 70712.C720

Amount of Each Receipt this Period

61.47

Interest Received

SUBTOTAL of Receipts This Page (optional)

100.35

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 64

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

179.18

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: 70712.C742

Amount of Each Receipt this Period

78.83

Interest Received

Full Name (Last, First, Middle Initial)

B. Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: 70712.C765

Amount of Each Receipt this Period

90.04

Interest Received

Full Name (Last, First, Middle Initial)

C. Wachovia Securities (1st Union Natl B

Mailing Address NC8502

P.O. Box 563966

City

Charlotte

State

NC

Zip Code

28262-3966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.19

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 70712.C772

Amount of Each Receipt this Period

91.97

Interest Received

SUBTOTAL of Receipts This Page (optional)

260.84

TOTAL This Period (last page this line number only)

361.19

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 / 64

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E446

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.50

CREDIT CARD FEES

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E449

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11.80

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E450

Date of Disbursement

/ /

Amount of Each Disbursement this Period

33.19

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

49.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 64

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E452

Date of Disbursement

/ /

Amount of Each Disbursement this Period

95.88

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E453

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.75

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E458

Date of Disbursement

/ /

Amount of Each Disbursement this Period

162.25

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

272.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 / 64

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E461

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.50

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E460

Date of Disbursement

/ /

Amount of Each Disbursement this Period

22.13

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E462

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.75

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

41.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 / 64

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E463

Date of Disbursement

/ /

Amount of Each Disbursement this Period

14.75

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E466

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.38

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E468

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.50

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

26.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E469

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.38

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E475

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7.38

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 2878

City
Omaha

State
NE

Zip Code
68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E477

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.50

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

19.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E478

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

36.88

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E479

Date of Disbursement

05 / 25 / 2007

Amount of Each Disbursement this Period

73.75

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 2878

City Omaha State NE Zip Code 68103-2878

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E482

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

4.50

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

115.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
MONTHLY MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E445

Date of Disbursement

/ /

Amount of Each Disbursement this Period

115.52

MONTHLY MERCHANT FEES

Full Name (Last, First, Middle Initial)

B. NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
MONTHLY MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E448

Date of Disbursement

/ /

Amount of Each Disbursement this Period

36.65

MONTHLY MERCHANT FEE

Full Name (Last, First, Middle Initial)

C. NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
MONTHLY MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E459

Date of Disbursement

/ /

Amount of Each Disbursement this Period

603.55

MONTHLY MERCHANT FEE

SUBTOTAL of Disbursements This Page (optional)

755.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
MONTHLY MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E467

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.39

MONTHLY MERCHANT FEE

Full Name (Last, First, Middle Initial)

B. NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
MONTHLY MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E476

Date of Disbursement

/ /

Amount of Each Disbursement this Period

110.53

MONTHLY MERCHANT FEE

Full Name (Last, First, Middle Initial)

C. NOVA

Mailing Address MSI Merchant Services
890 Mountain Avenue

City New Providence State NJ Zip Code 07974-

Purpose of Disbursement
MONTHLY MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70712.E481

Date of Disbursement

/ /

Amount of Each Disbursement this Period

165.98

MONTHLY MERCHANT FEE

SUBTOTAL of Disbursements This Page (optional)

626.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address Service Center

City Ogden State UT Zip Code 84201-

Purpose of Disbursement
2005 INCOME TAX

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E447

Date of Disbursement

01 / 19 / 2007

Amount of Each Disbursement this Period

226.94

2005 INCOME TAX

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address Service Center

City Ogden State UT Zip Code 84201-

Purpose of Disbursement
2006 FEDERAL INCOME TAX PMT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E464

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

306.00

2006 FEDERAL INCOME TAX
PMT

SUBTOTAL of Disbursements This Page (optional)

532.94

TOTAL This Period (last page this line number only)

2440.33

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Prosperity PAC

Mailing Address 429 North Saint Asaph

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 70712.E484

Date of Disbursement

M M / D D / Y Y Y Y
06 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Red PAC

Mailing Address 104 Hume Street

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 70712.E457

Date of Disbursement

M M / D D / Y Y Y Y
02 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Chambliss for Senate

Mailing Address 100 Galleria Pkwy SE
Suite 605

City Atlanta State GA Zip Code 30339-5947

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
SAXBY CHAMBLISS

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 00

Transaction ID: 70712.E472

Date of Disbursement

M M / D D / Y Y Y Y
04 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Texans for Senator John Cornyn

Mailing Address 1203 Portner Rd

City Alexandria State VA Zip Code 22314-1316

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
JOHN CORNYN

Office Sought: ☐ House
☒ Senate
☐ President

State: TX District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70712.E456

Date of Disbursement

02 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Keller for Congress

Mailing Address PO Box 1453

City Orlando State FL Zip Code 32802-1453

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
RICHARD A KELLER

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 08

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70712.E480

Date of Disbursement

05 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Keller for Congress

Mailing Address PO Box 1453

City Orlando State FL Zip Code 32802-1453

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
RICHARD A KELLER

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 08

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70712.E483

Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

1500.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. McConnell Senate Committee 08

Mailing Address 400 N Capitol St NW
Suite 585

City Washington State DC Zip Code 20001-1502

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
MITCH MCCONNELL

Office Sought: ☐ House
☒ Senate
☐ President

State: KY District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E455

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. McConnell Senate Committee 08

Mailing Address 400 N Capitol St NW
Suite 585

City Washington State DC Zip Code 20001-1502

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
MITCH MCCONNELL

Office Sought: ☐ House
☒ Senate
☐ President

State: KY District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E473

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Mark Pryor for US Senate Committee

Mailing Address 420 C St NE

City Washington State DC Zip Code 20002-5818

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
MARK LUNSFORD PRYOR

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70712.E454

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Franchisee Association PAC (NFA-PAC)

Full Name (Last, First, Middle Initial)

A. Team Sununu

Mailing Address 900 19th St NW Fl 8
8th Floor

City Washington State DC Zip Code 20006-2105

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
JOHN E SUNUNU

Office Sought: ☐ House
☒ Senate
☐ President

State: NH District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70712.E474

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

16000.00